

**FEC  
FORM 3X****REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Spirit of Democracy America

ADDRESS (number and street) ▼

455 Capitol Mall, Suite 600

☐ Check if different than previously reported. (ACC)

Sacramento

CA

95814

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00521211

3. IS THIS  
REPORT☒NEW  
(N)

OR

☐AMENDED  
(A)

## 4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15  
Quarterly Report (Q1)☐ July 15  
Quarterly Report (Q2)☐ October 15  
Quarterly Report (Q3)☐ January 31  
Year-End Report (YE)☐ July 31 Mid-Year  
Report (Non-election  
Year Only) (MY)☐ Termination Report  
(TER)(b) Monthly  
Report  
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)  
(Non-Election  
Year Only)☐ Mar 20 (M3)☒ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)  
(Non-Election  
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

(d) 30-Day

POST-Election

Report for the:

☐ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y

in the  
State of

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y

05

01

2016

05

31

2016

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Thomas W. Hiltachk

Signature of Treasurer

Thomas W. Hiltachk

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y

06

16

2016

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office  
Use  
Only**FEC FORM 3X**  
Rev. 12/2004

# SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Spirit of Democracy America

Report Covering the Period:

From:

 M M / D D / Y Y Y Y Y  
 05 / 01 / 2016

To:

 M M / D D / Y Y Y Y Y  
 05 / 31 / 2016

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, 2016		22474.93
(b) Cash on Hand at Beginning of Reporting Period.....	71379.78	
(c) Total Receipts (from Line 19) .....	204800.00	299600.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	276179.78	322074.93
7. Total Disbursements (from Line 31) .....	215387.31	261282.46
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d)) .....	60792.47	60792.47
9. Debts and Obligations Owed <b>TO</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	
10. Debts and Obligations Owed <b>BY</b> the Committee (Itemize all on Schedule C and/or Schedule D) .....	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

## For further information contact:

Federal Election Commission  
999 E Street, NW  
Washington, DC 20463

Toll Free 800-424-9530  
Local 202-694-1100

# **DETAILED SUMMARY PAGE** of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Spirit of Democracy America

Report Covering the Period:

From:

M M / D D / Y Y Y Y Y  
05 / 01 / 2016

To:

M M / D D / Y Y Y Y Y  
05 / 31 / 2016
**I. Receipts**
**COLUMN A**  
**Total This Period**
**COLUMN B**  
**Calendar Year-to-Date**

## 11. Contributions (other than loans) From:

## (a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

204800.00

299600.00

(ii) Unitemized .....

0.00

0.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

204800.00

299600.00

(b) Political Party Committees .....

0.00

0.00

(c) Other Political Committees

(such as PACs).....

0.00

0.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5) ..... ▶

204800.00

299600.00

## 12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

## 13. All Loans Received .....

0.00

0.00

## 14. Loan Repayments Received.....

0.00

0.00

## 15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

## 16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

## 17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

## 18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3).....

0.00

0.00

(b) Levin Funds (from Schedule H5) .....

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),  
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

204800.00

299600.00

## 20. Total Federal Receipts

(subtract Line 18(c) from Line 19)..... ▶

204800.00

299600.00

**DETAILED SUMMARY PAGE**

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share .....	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures .....	-32754.19	13140.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b)) .....	-32754.19	13140.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10000.00	10000.00
24. Independent Expenditures (use Schedule E) .....	238141.50	238141.50
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees .....	0.00	0.00
(b) Political Party Committees .....	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements .....	0.00	0.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share .....	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds .....	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	215387.31	261282.46
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	215387.31	261282.46

**DETAILED SUMMARY PAGE**  
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3) .....	204800.00	299600.00
34. Total Contribution Refunds (from Line 28(d)) .....	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33) .....	204800.00	299600.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ..... ►	-32754.19	13140.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ..... ►	-32754.19	13140.96

# **SCHEDULE A (FEC Form 3X)** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
for each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 OF 17  
 (check only one)  
☒ 11a ☐ 11b ☐ 11c ☐ 12  
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee.

NAME OF COMMITTEE (In Full)

**Spirit of Democracy America**

Full Name (Last, First, Middle Initial)

**A. Charles Munger, Jr.**

Mailing Address 1423 Hamilton Avenue

City State Zip Code  
 Palo Alto CA 94301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed - Charles Munger, Jr.

Occupation

Physicist

Receipt For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

209600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 01 / 2016

**Transaction ID : NONA246**

Amount of Each Receipt this Period

4800.00

☐ Memo Item

In-kind contribution for campaign strategy services

Full Name (Last, First, Middle Initial)

**B. Charles Munger, Jr.**

Mailing Address 1423 Hamilton Avenue

City State Zip Code  
 Palo Alto CA 94301

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Self Employed - Charles Munger, Jr.

Occupation

Physicist

Receipt For: 2016

☐ Primary ☐ General  
☒ Other (specify) ▼

Aggregate Year-to-Date ▼

209600.00

Date of Receipt

M M / D D / Y Y Y Y Y Y  
 05 / 17 / 2016

**Transaction ID : INCA253**

Amount of Each Receipt this Period

200000.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City State Zip Code

FEC ID number of contributing  
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General  
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

☐ Memo Item

**SUBTOTAL** of Receipts This Page (optional)..... ►

**TOTAL** This Period (last page this line number only)..... ►

204800.00

204800.00

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 7 OF 17

☒ 21b   ☐ 22   ☐ 23   ☐ 24   ☐ 25   ☐ 26  
☐ 27   ☐ 28a   ☐ 28b   ☐ 28c   ☐ 29   ☐ 30b

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NAME OF COMMITTEE (In Full)

**Spirit of Democracy America**

Full Name (Last, First, Middle Initial)

**A. Charles Munger, Jr.**

Mailing Address 1423 Hamilton Avenue

City Palo Alto State CA Zip Code 94301

Purpose of Disbursement  
In-kind contribution for campaign strategy services

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary   ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 01 2016
**Transaction ID : NONB246**

Amount of Each Disbursement this Period

4800.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Bell, McAndrews & Hiltachk, LLP**

Mailing Address 455 Capitol Mall, Suite 600

City Sacramento State CA Zip Code 95814

Purpose of Disbursement  
Legal & Accounting Services and Expenses

Candidate Name

Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary   ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 12 2016
**Transaction ID : EXPB244**

Amount of Each Disbursement this Period

1475.81

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. California Republican Taxpayers Association**

Mailing Address 1130 Fremont Blvd, Suite 105-115

City Seaside State CA Zip Code 93955

Purpose of Disbursement  
To offset Schedule E Expense; Slate Card Mailer; Paid 04/18/2016

Candidate Name

**California Republican Taxpayers Association**
Office Sought: ☐ House  
☐ Senate  
☐ President

Disbursement For: 2016

☐ Primary   ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y  
05 12 2016
**Transaction ID : EXPB241**

Amount of Each Disbursement this Period

-684.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

5591.81

**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 8 OF 17

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Spirit of Democracy America**

Full Name (Last, First, Middle Initial)

**A. California Republican Taxpayers Association**

Mailing Address 1130 Fremont Blvd, Suite 105-115

City	State	Zip Code
Seaside	CA	93955

Purpose of Disbursement  
To offset Schedule E Expense; Slate Card Mailer; Paid 04/12/2016

004

Candidate Name

**California Republican Taxpayers Association**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

**Transaction ID : EXPB240**

Amount of Each Disbursement this Period

-31112.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. California Republican Taxpayers Association**

Mailing Address 1130 Fremont Blvd, Suite 105-115

City	State	Zip Code
Seaside	CA	93955

Purpose of Disbursement  
To offset Schedule E Expense; Slate Card Mailer; Paid 04/12/2016

004

Candidate Name

**California Republican Taxpayers Association**Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

**Transaction ID : EXPB239**

Amount of Each Disbursement this Period

-3734.00

☐ Memo Item

Full Name (Last, First, Middle Initial)

**C. Chariot LLC**

Mailing Address 342 Edna Street

City	State	Zip Code
San Francisco	CA	94112

Purpose of Disbursement  
To offset Schedule E Expense; Research / Research Services; Paid  
03/22/2016

005

Candidate Name

Category/  
TypeOffice Sought: ☐ House  
☐ Senate  
☐ PresidentDisbursement For: 2016  
☐ Primary ☐ General  
☒ Other (specify) ▼

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		12		2016

**Transaction ID : EXPB248**

Amount of Each Disbursement this Period

-3500.00

☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

-38346.00

-32754.19



**SCHEDULE B (FEC Form 3X)  
ITEMIZED DISBURSEMENTS**Use separate schedule(s)  
for each category of the  
Detailed Summary PageFOR LINE NUMBER:  
(check only one)

PAGE 9 OF 17

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

**Spirit of Democracy America**

Full Name (Last, First, Middle Initial)

**A. Californians for Fiscal Responsibility**

Mailing Address 455 Capitol Mall, Suite 600

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement

011

Category/  
Type

Candidate Name

**Californians for Fiscal Responsibility**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		16		2016

**Transaction ID : EXPB252**

Amount of Each Disbursement this Period

10000.00
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☐ Memo Item

Full Name (Last, First, Middle Initial)

**B. Californians for Fiscal Responsibility**

Mailing Address 455 Capitol Mall, Suite 600

City	State	Zip Code
Sacramento	CA	95814

Purpose of Disbursement

In-Kind Contribution - Survey and Research

011

Category/  
Type

Candidate Name

**Californians for Fiscal Responsibility**

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For: 2016

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input checked="" type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
05		18		2016

**Transaction ID : NONB259**

Amount of Each Disbursement this Period

14375.00
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☒ Memo Item

Full Name (Last, First, Middle Initial)

**C.**

Mailing Address

City	State	Zip Code
------	-------	----------

Purpose of Disbursement

Category/  
Type

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

Disbursement For:

<input type="checkbox"/> Primary	<input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼	

State: District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
-------	---	-------	---	-------------

Amount of Each Disbursement this Period

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☐ Memo Item**SUBTOTAL** of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

10000.00
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10000.00
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**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 10 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on		<div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              . . / . . / . . . . . .           </div>	

Full Name of Payee <b>California Republican Taxpayers Association</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              05 / 12 / 2016           </div>	
Mailing Address 1130 Fremont Blvd, Suite 105-115				Amount <div style="border: 1px solid black; padding: 2px;">             . . . . . 31112.00           </div>	
City Seaside	State CA	Zip Code 93955		Transaction ID : EDTEALC173	
Purpose of Expenditure Slate Card Mailer; Dissemination Date 05/12/2016		Category/Type 004		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              05 / 12 / 2016           </div>	
Name of Federal Candidate George 'Duf' Sundheim		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;">             . . . . . 52862.00           </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

Full Name of Payee <b>California Republican Taxpayers Association</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              05 / 12 / 2016           </div>	
Mailing Address 1130 Fremont Blvd, Suite 105-115				Amount <div style="border: 1px solid black; padding: 2px;">             . . . . . 3734.00           </div>	
City Seaside	State CA	Zip Code 93955		Transaction ID : EDTEALC172	
Purpose of Expenditure Slate Card Mailer; Dissemination Date 05/12/2016		Category/Type 004		Date of Disbursement or Obligation <div style="border: 1px solid black; padding: 2px;">             M M / D D / Y Y Y Y Y Y              05 / 12 / 2016           </div>	
Name of Federal Candidate Paul Cook		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought		<div style="border: 1px solid black; padding: 2px;">             . . . . . 160987.66           </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶ _____	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">             . . . . . 34846.00           </div>
(b) SUBTOTAL of Unitemized Independent Expenditures .....	<div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>
(c) TOTAL Independent Expenditures.....▶	<div style="border: 1px solid black; padding: 2px;">             . . . . .           </div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

M M / D D / Y Y Y Y Y Y  
 06 / 16 / 2016

Signature

Full Name of Payee <b>California Republican Taxpayers Association</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>05 / 12 / 2016</div> </div>	
Mailing Address 1130 Fremont Blvd, Suite 105-115			Amount <div> <div>XXXXXXXXXX</div> <div>684.00</div> </div>	
City Seaside	State CA	Zip Code 93955	<b>Transaction ID : EDTEALC171</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>05 / 12 / 2016</div> </div>	
Purpose of Expenditure Slate Card Mailer; Dissemination Date 05/12/2016		Category/ Type <div> <div>XXXX</div> <div>004</div> </div>		
Name of Federal Candidate Christopher Castillo		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President <input type="checkbox"/> Senate	
			District: <u>44</u> State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		<div> <div>XXXXXXXXXX</div> <div>684.00</div> </div>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>Chariot LLC</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 342 Edna Street			Amount 3500.00	
City San Francisco	State CA	Zip Code 94112	Transaction ID : <b>EDTEALC159</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 02 / 2016	
Purpose of Expenditure Research / Research Services; Dissemination Date 05/12/2016		Category/ Type 005		
Name of Federal Candidate George 'Duf' Sundheim		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House <input checked="" type="checkbox"/> Senate <input type="checkbox"/> President District: _____ State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		52862.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	➤	4184.00
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	➤	
(c) <b>TOTAL</b> Independent Expenditures.....	➤	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

Full Name of Payee <b>Chariot LLC</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination MM / DD / YYYY 05 / 12 / 2016	
Mailing Address 342 Edna Street			Amount 14750.00	
City San Francisco	State CA	Zip Code 94112	Transaction ID : <b>EDTEALC161</b> Date of Disbursement or Obligation MM / DD / YYYY 05 / 04 / 2016	
Purpose of Expenditure Survey / Survey Research; Dissemination Date 05/12/2016		Category/ Type 005		
Name of Federal Candidate George 'Duf' Sundheim		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input type="checkbox"/> House District: _____ <input type="checkbox"/> President <input checked="" type="checkbox"/> Senate State: <u>CA</u>	
Calendar Year-To-Date Per Election for Office Sought		52862.00	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ► _____	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 5px; width: 200px; text-align: right;">18250.00</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	<div style="border: 1px solid black; padding: 5px; width: 200px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....	▶	<div style="border: 1px solid black; padding: 5px; width: 200px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 13 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report		<input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on	

Full Name of Payee <b>McNally Temple Associates, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 12 / 2016</b>	
Mailing Address 1817 Capitol Avenue				Amount <b>19600.00</b>	
City Sacramento	State CA	Zip Code 95811		Transaction ID : <b>EDTEALC157</b>	
Purpose of Expenditure Survey / Survey Research; Dissemination Date 05/12/2016		Category/Type <b>005</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 10 / 2016</b>	
Name of Federal Candidate Paul Cook		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>160987.66</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>McNally Temple Associates, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 12 / 2016</b>	
Mailing Address 1817 Capitol Avenue				Amount <b>12500.00</b>	
City Sacramento	State CA	Zip Code 95811		Transaction ID : <b>EDTEALC158</b>	
Purpose of Expenditure Research / Research Services; Dissemination Date 05/12/2016		Category/Type <b>005</b>		Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 10 / 2016</b>	
Name of Federal Candidate Paul Cook		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>	
Calendar Year-To-Date Per Election for Office Sought		<b>160987.66</b>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) SUBTOTAL of Itemized Independent Expenditures.....▶	<b>32100.00</b>
(b) SUBTOTAL of Unitemized Independent Expenditures.....▶	
(c) TOTAL Independent Expenditures.....▶	

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

MM / DD / YYYY  
**06 / 16 / 2016**

Signature

Full Name of Payee <b>McNally Temple Associates, Inc.</b>		<input type="checkbox"/> Memo Item	Date of Public Distribution/Dissemination <div> <div>MM / DD / YYYY</div> <div>05 / 18 / 2016</div> </div>	
Mailing Address 1817 Capitol Avenue			Amount <div> <div>Amount</div> <div>34000.00</div> </div>	
City Sacramento	State CA	Zip Code 95811	<b>Transaction ID : EDTEALC162</b> Date of Disbursement or Obligation <div> <div>MM / DD / YYYY</div> <div>05 / 18 / 2016</div> </div>	
Purpose of Expenditure Advertising - TV; Dissemination Date 05/18/16		Category/ Type <div> <div>Category/Type</div> <div>004</div> </div>		
Name of Federal Candidate Paul Cook		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate State: CA	
Calendar Year-To-Date Per Election for Office Sought <div> <div>Calendar Year-To-Date Per Election for Office Sought</div> <div>160987.66</div> </div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General <input type="checkbox"/> Other (specify) ▶		

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**

 PAGE 15 OF 17  
 FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">M M M</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">D D D</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">Y Y Y Y Y Y</div>			

Full Name of Payee <b>McNally Temple Associates, Inc.</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">18</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Mailing Address 1817 Capitol Avenue					Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">19898.86</div>	
City Sacramento	State CA	Zip Code 95811				
Purpose of Expenditure Direct Mail Services; Dissemination Date 05/18/16			Category/Type 004		Transaction ID : EDTEALC164 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">18</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Name of Federal Candidate Paul Cook			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 08 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">160987.66</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

Full Name of Payee <b>McNally Temple Associates, Inc.</b>			<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">19</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Mailing Address 1817 Capitol Avenue					Amount <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">12553.92</div>	
City Sacramento	State CA	Zip Code 95811				
Purpose of Expenditure Direct Mail Services; Dissemination Date 05/19/16			Category/Type 004		Transaction ID : EDTEALC165 Date of Disbursement or Obligation <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">05</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">18</div> / <div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">2016</div>	
Name of Federal Candidate Peter Kuo			<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose		Office Sought: <input checked="" type="checkbox"/> House    District: 17 <input type="checkbox"/> President <input type="checkbox"/> Senate    State: CA	
Calendar Year-To-Date Per Election for Office Sought			<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">23607.84</div>		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;">32452.78</div>
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>
(c) <b>TOTAL</b> Independent Expenditures.....▶	<div style="display: inline-block; border: 1px solid black; padding: 2px; margin: 0 5px;"></div>

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

[Electronically Filed]

Date

06

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16

 / 
 

2016

Signature

**SCHEDULE E (FEC Form 3X)**  
**ITEMIZED INDEPENDENT EXPENDITURES**PAGE 16 OF 17  
FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) <b>Spirit of Democracy America</b>		FEC IDENTIFICATION NUMBER ▼ <b>C</b> C00521211	
Check if <input type="checkbox"/> 24-hour report <input type="checkbox"/> 48-hour report <input type="checkbox"/> New report <input type="checkbox"/> Amends report filed on			
Full Name of Payee <b>McNally Temple Associates, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 20 / 2016</b>	
Mailing Address <b>1817 Capitol Avenue</b>		Amount <b>19898.86</b>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95811</b>	Transaction ID : <b>EDTEALC166</b>
Purpose of Expenditure Direct Mail Services; Dissemination Date 05/20/16		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 19 / 2016</b>
Name of Federal Candidate <b>Paul Cook</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought		<b>160987.66</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
Full Name of Payee <b>McNally Temple Associates, Inc.</b>		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 23 / 2016</b>	
Mailing Address <b>1817 Capitol Avenue</b>		Amount <b>19898.86</b>	
City <b>Sacramento</b>	State <b>CA</b>	Zip Code <b>95811</b>	Transaction ID : <b>EDTEALC167</b>
Purpose of Expenditure Direct Mail Services; Dissemination Date 05/23/16		Category/Type <b>004</b>	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 24 / 2016</b>
Name of Federal Candidate <b>Paul Cook</b>		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House District: <b>08</b> <input type="checkbox"/> President <input type="checkbox"/> Senate State: <b>CA</b>
Calendar Year-To-Date Per Election for Office Sought		<b>160987.66</b>	Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶
(a) SUBTOTAL of Itemized Independent Expenditures.....		<b>39797.72</b>	
(b) SUBTOTAL of Unitemized Independent Expenditures .....			
(c) TOTAL Independent Expenditures.....			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Signature  <i>Thomas W. Hiltachk</i>		Date MM / DD / YYYY <b>06 / 16 / 2016</b>	
		[Electronically Filed]	



Full Name of Payee <b>McNally Temple Associates, Inc.</b>		<input type="checkbox"/> Memo Item		Date of Public Distribution/Dissemination MM / DD / YYYY <b>05 / 26 / 2016</b>	
Mailing Address 1817 Capitol Avenue				Amount 11558.22	
City Sacramento	State CA	Zip Code 95811	Transaction ID : <b>EDTEALC169</b>		
Purpose of Expenditure Direct Mail Services; Dissemination Date 05/26/16		Category/ Type	Date of Disbursement or Obligation MM / DD / YYYY <b>05 / 24 / 2016</b>		
Name of Federal Candidate Paul Cook		<input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	Office Sought: <input checked="" type="checkbox"/> House <input type="checkbox"/> President District: <b>08</b> State: <b>CA</b>		
Calendar Year-To-Date Per Election for Office Sought		160987.66		Disbursement For: <input checked="" type="checkbox"/> Primary <input type="checkbox"/> General 2016 <input type="checkbox"/> Other (specify) ▶	

(a) <b>SUBTOTAL</b> of Itemized Independent Expenditures.....	▶	31457.08
(b) <b>SUBTOTAL</b> of Unitemized Independent Expenditures .....	▶	
(c) <b>TOTAL</b> Independent Expenditures.....	▶	238141.50

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Thomas W. Hiltachk

*[Electronically Filed]*

Date \_\_\_\_\_

Three examples of 1D barcodes are shown, each consisting of a header and a data field. The first barcode has the header 'MM' and the data '06'. The second has the header 'DD' and the data '16'. The third has the header 'YYYY' and the data '2016'. Each header and data field is represented by a series of vertical bars of varying heights.

Signature